

SCC eFile

**2012 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION**

212543129

1.) CORPORATION NAME:

DUE DATE: **11/30/2012****Macy's Corporate Services, Inc.**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

SCC ID NO: **F1570078****CORPORATION SERVICE COMPANY****Bank of America Center, 16th Floor****1111 East Main Street**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	100

**RICHMOND, VA 23219**

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**DE**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 7 WEST SEVENTH ST

CITY/ST/ZIP: CINCINNATI, OH 45202

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: DENNIS BRODERICK  
TITLE: PRESIDENT  
ADDRESS: 7 W SEVENTH ST  
CITY/ST/ZIP/CO: CINCINNATI, OH 45202

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OFFICER

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DIRECTOR

NAME: BRADLEY MAYS  
TITLE: PRESIDENT  
ADDRESS: 7 WEST SEVENTH ST  
CITY/ST/ZIP/CO: CINCINNATI, OH 45202

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OFFICER

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DIRECTOR

NAME: DAVID W. CLARK  
TITLE: EXECUTIVE VP  
ADDRESS: 7 WEST 7TH STREET  
CITY/ST/ZIP/CO: CINCINNATI, OH 45202

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OFFICER

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DIRECTOR

NAME: CARL L. GOERTEMOELLER  
TITLE: VICE PRESIDENT  
ADDRESS: 7 WEST 7TH STREET  
CITY/ST/ZIP/CO: CINCINNATI, OH 45202

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OFFICER

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DIRECTOR

NAME: AMY L. HANSON  
TITLE: EXECUTIVE VP  
ADDRESS: 7 WEST 7TH STREET  
CITY/ST/ZIP/CO: CINCINNATI, OH 45202

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OFFICER

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DIRECTOR

NAME: KAREN HOGUET  
TITLE: VP/T  
ADDRESS: 7 WEST SEVENTH ST  
CITY/ST/ZIP/CO: CINCINNATI, OH 45202

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OFFICER

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DIRECTOR

NAME:	BILL LYON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	5985 STATE BRIDGE RD		
CITY/ST/ZIP/CO:	JOHNS CREEK, GA 30097		
NAME:	BERNIE REISS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	7 WEST 7TH STREET		
CITY/ST/ZIP/CO:	CINCINNATI, OH 45202		
NAME:	THOMAS E. ROBERTS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	2101 E. KEMPER RD		
CITY/ST/ZIP/CO:	CINCINNATI, OH 45241		
NAME:	ANN MUNSON STEINES	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	7 WEST 7TH STREET		
CITY/ST/ZIP/CO:	CINCINNATI, OH 45202		
NAME:	LINDA BALICKI	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	611 OLIVE ST		
CITY/ST/ZIP/CO:	ST. LOUIS, MO 63101		
NAME:	KATHLEEN A. FURLONG	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	7 WEST 7TH STREET		
CITY/ST/ZIP/CO:	CINCINNATI, OH 45202		
NAME:	CHRISTOPHER M. KELLY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	7 WEST 7TH STREET		
CITY/ST/ZIP/CO:	CINCINNATI, OH 45202		
NAME:	STEPHEN J. O'BRYAN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	7 WEST 7TH STREET		
CITY/ST/ZIP/CO:	CINCINNATI, OH 45202		
NAME:	GARY A. WEBB	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	7 WEST 7TH STREET		
CITY/ST/ZIP/CO:	CINCINNATI, OH 45202		
NAME:	BRIAN SZAMES	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	7 WEST SEVENTH ST		
CITY/ST/ZIP/CO:	CINCINNATI, OH 45202		
NAME:	STEVEN G. LUCAS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST TREASURER		
ADDRESS:	7 WEST 7TH STREET		
CITY/ST/ZIP/CO:	CINCINNATI, OH 45202		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SUSAN P. STORER ASST TREASURER 7 WEST 7TH STREET CINCINNATI, OH 45202	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOEL A. BELSKY DIRECTOR 7 WEST 7TH STREET CINCINNATI, OH 45202	<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.					
/s/ STEPHEN J. O'BRYAN SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	STEPHEN J. O'BRYAN, ASST SECRETARY PRINTED NAME AND CORPORATE TITLE	11/7/2012 DATE			
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.					